PART B - FEE(S) TRANSMITTAL

Complete and send	this form, together w	ith applicable	e fee(s), to: Mail	Commissioner for	FEE or Patents	
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	10.			CATION FEE (if requal of maintenance fees correspondence address	nired). Blocks 1 through 5 will be mailed to the current; and/or (b) indicating a sep	should be completed where it correspondence address as parate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for a 33438 7590 04/13/2006 HAMILTON & TERRILE, LLP P.O. BOX 203518 AUSTIN, TX 78720		ny change of address)		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Electronically Submitted Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. Robert W. Holland (Depositor's name)		
				/Robert W	. Holland/	(Depositor's name) (Signature)
				June 22,	2006	(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
APPLN. TYPE	YSTEM AND METHOD FO	R MANAGING		NDLING SYSTEM AD	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$140		\$300	\$1700	07/13/2006
EXAMINER		ART U	·····	ASS-SUBCLASS	1	07/13/2000
PAPE, ZACHARY		2835		361-683000		
"Fee Address" indicat PTO/SB/47; Rev 03-02 o Number is required. 3. ASSIGNEE NAME AND	ence address (or Change of etc.) attached. ion (or "Fee Address" Indicar more recent) attached. Use	Correspondence tion form of a Customer	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. N THE PATENT (print or type)			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						ocument has been filed for
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Please check the appropriate	assignee category or catego	ries (will not be p	rinted on the patent)	☐ Individual	orporation or other private gr	oup entity Government
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5. Change in Entity Status a. Applicant claims St	(from status indicated above MALL ENTITY status, See 2	•	☐ b. Applicant is no	longer claiming SMA	LL ENTITY status. See 37 C	EFR 1 27(g)(2)
The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issuablication Fee (if required) v	e Fee and Publica	ation Fee (if any) or to			
Authorized Signature	/Robert W. Ho	lland/		Date	June 22, 2	006
Typed or printed name	Robert W. Ho	11and		Registration l	40,020	
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